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|-----------------------------------|---------|-------------|---------|------------|--------------|--------|
| To: Sup. Examiner Lucchesi        | From:   | Jay         | Shah    |            |              |        |
| Fax: (703) 872 - 9306             | Date:   | <i>2</i> 1  |         |            |              |        |
| Phone: (703) 308 - 2698           | Pages   | : (14) Inch |         | sheet      |              |        |
| Re: 09/254,078                    | CC:     |             |         |            | <del> </del> |        |
|                                   |         |             |         |            |              |        |
| ☐ Urgent ☐ For Review ☐ Please Co | mment   | □ Please    | Reply   | ☐ Please l | Recycle      |        |
|                                   |         |             |         |            |              |        |
| •Comments:                        |         |             |         |            |              |        |
| Dear Supervisory Pater            | 4 E     | Kamine      | n Luc   | chesi      |              |        |
| year of a                         | (       | ι.          | <br>    |            |              |        |
| Attached please Lind an           | verry k | aunt A      | es pona | ing to     |              |        |
| the restriction reguirem          | المب    | اند هند     | 7/254   | ,0718.     |              |        |
| V                                 |         |             |         |            |              |        |
| Thank you,                        |         |             |         |            |              |        |
| Jay Shah                          |         |             |         |            |              |        |
| JASVANTRAI C. SHAH)               |         |             |         |            |              | •      |
| (6-12) 728-5552                   |         |             |         |            |              |        |
| 10m3 1 17 X- 2220                 |         |             |         |            |              |        |

## UNITED STATES PATENT AND TRADEMARK OFFICE

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Appl. No.

09/254,078

Confirmation No. 6452

**CENTRAL FAX CENTER** 

Applicant

Rudger Rubbert

AUG 0 6 2004

Filed

05/03/1999

TC/A.U.

3764

Examiner

Nicholas D. Lucchesi

Docket No. Customer No. :

00-1030 000038600

Title

METHOD AND DEVICE FOR CARRYING OUT OPTICAL

**PICKUP** 

Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450

### TRANSMITTAL LETTER

Sir:

- 1. We are transmitting herewith the attached:
  - 1. RESPONSE TO RESTRICTION REQUIREMENT
- 2. With respect to additional fees:
  - A. X No additional fee is required.
  - B. \_\_\_ Attached is a check in the amount of \$
  - C. Charge the total additional fee to our Deposit Account No. 50-2844.
- Please charge any additional fees or credit overpayment to Deposit Account No. 50-3. 2844.
- CERTIFICIATE OF TRANSMISSION UNDER 37 CFR § 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described in paragraph 1 hereinabove, are being transmitted by facsimile to number (703) 872-9306 addressed to: Supervisory Patent Examiner Nicholas D. Lucchesi, on this 6th day of August, 2004.

Jasvantrai C. Shah Reg. No. 39,444

OraMetrix. Inc. 2350 Campbell Creek Blvd., Suite 400 Richardson, Texas 75082

# UNITED STATES PATENT AND TRADEMARK OFFICE



RECEIVED CENTRAL FAX CENTER

Appl. No.

09/254,078

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Applicant Filed Rudger Rubbert

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Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450

# RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the Office action of July 22, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

Please change the Attorney Docket No. from 59-99 to 00-1030.

Please charge any required fees to deposit account no. 50-2844.

OraMetrix, Inc.

Page 1 of 12

2350 Campbell Creek Blvd., Suite 400

Richardson, Texas 75082